

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	CM	62614	3/16/10
O.I.P.E. CLASSIFIER		16	32300
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		214176	8/12/00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	11/20/01
2	11/20/01
3	11/20/01
4	11/20/01
5	11/20/01
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8	11/20/01
9	11/20/01
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Claim	Date
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If more than 150 claims or 10 actions  
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